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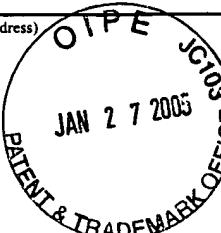
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Ann Trent	(Depositor's name)
<i>Ann Trent</i>	(Signature)
1-24-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09643,499	08/22/2000	Robert Floyd Payne	TI-28881	9182

TITLE OF INVENTION: METHOD AND APPARATUS FOR TESTING A SERIAL TRANSMITTER CIRCUIT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	<del>\$1378</del> \$1400	\$0	<del>\$1378</del> \$1400	02/18/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
LE, AMANDA T	2634	375-224000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. J. Dennis Moore  
 2. W. James Brady III  
 3. Frederick J. Telecky Jr.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Texas Instruments Incorporated

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Dallas, Texas

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

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 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 20-0668 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature \_\_\_\_\_

Typed or printed name J. Dennis Moore

Date 1/24/05

Registration No. 28,885

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